

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000083467

FILED  
Jan 25, 2007  
Secretary of State

Entity Name: EXION CAPITAL MARKETS, LLC

**Current Principal Place of Business:**

335 S KROME AVENUE  
SUITE # 104  
FLORIDA CITY, FL 33034 US

**New Principal Place of Business:**

**Current Mailing Address:**

335 S KROME AVENUE  
SUITE # 104  
FLORIDA CITY, FL 33034 US

**New Mailing Address:**

FEI Number: 20-5559940

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

OPTIMUM TAX SERVICES, INC.  
335 S KROME AVENUE  
SUITE # 104  
FLORIDA CITY, FL 33034 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SANCHEZ, JAQUELIN  
Address: 1275 WEST 35TH. STREET, APT 22B  
City-St-Zip: HIALEAH, FL 33012

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: DOMINGUEZ, KARINA  
Address: 14631 BARGOWAN ROAD APT. 201  
City-St-Zip: MIAMI LAKES, FL 33016

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KARINA DOMINGUEZ

MGRM

01/25/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date